

ANIMAL QUARANTINE DOCUMENT SUBMITTAL FORM

Send this form along with documents and payment to: Animal Quarantine Branch
99-951 Halawa Valley Street
Aiea, Hawaii 96701

Please Type or Print Legibly

OWNER'S NAME	DAY PHONE NUMBER	
ADDRESS		
CITY	STATE	ZIP CODE
E-MAIL ADDRESS		

PET'S NAME	MICROCHIP NUMBER	FORMS SUBMITTED (Check all forms enclosed for each pet)			ESTIMATED DATE OF ARRIVAL	TYPE OF PROGRAM APPLYING FOR				PRE-PAYMENT AMOUNT ENCLOSED
		AQS-2 PET OWNER STATEMENT	RABIES VACCINATION CERTIFICATE	HEALTH CERTIFICATE		DIRECT AIRPORT RELEASE \$165.00	5 DAYS OR LESS \$224.00	30 DAY \$655.00	120 DAY \$1080.00	
1.										
2.										
3.										
4.										
5.										
6.										
7.										
TOTAL PRE-PAYMENT AMOUNT (Make money order or cashier's check out to: Department of Agriculture). NO PERSONAL CHECKS ACCEPTED										

OWNER'S SIGNATURE	DATE
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